

IN THE CLAIMS:

1. (Withdrawn) An apparatus for isolating a region of a lung, comprising:  
a closure device comprising a plurality of elongate elements, each elongate element comprising a first end defining a tissue penetrating tip, a second end opposite the first end, and an intermediate region between the first and second ends, and a hinged region pivotally coupling the intermediate regions of the elongate elements together such that the first ends are movable from a contracted condition away from one another towards an expanded condition when the second ends are directed towards one another.
2. (Withdrawn) The apparatus of claim 1, wherein the hinged region comprises an elastic material for biasing the first ends towards the contracted condition.
3. (Withdrawn) The apparatus of claim 2, further comprising:  
a tubular member comprising a proximal end, a distal end having a size for insertion into a body lumen, and a lumen extending between the proximal and distal ends, the closure device being disposed within the lumen with the first ends oriented towards a distal outlet of the lumen; and  
a pusher member disposed within the lumen proximal to the closure device, the pusher member being slidable relative to the tubular member for deploying the closure device from the distal outlet.
4. (Withdrawn) The apparatus of claim 3, wherein the tubular member comprises a deflecting element for engaging the closure device during deployment from the distal outlet to direct the second ends towards one another and thereby moving the first ends towards the expanded condition.
5. (Original) A device for closing a bronchial passage, comprising:

an annular body defining an opening therethrough and including a plurality of tines extending from the body away from the opening, the body being compressible from an expanded condition towards a contracted condition for facilitating introduction into a bronchial passage; and a flexible membrane extending across the opening for substantially sealing the opening from air flow therethrough.

6. (Original) The device of claim 5, wherein the tines extend radially outwardly from the body in the expanded condition, thereby defining a substantially planar configuration.

7. (Original) The device of claim 5, wherein the tines 322 are deflected towards one another in the contracted condition such that the body defines a concave configuration.

8. (Original) The device of claim 5, wherein the tines are biased towards the expanded condition.

9. (Original) A method for reducing volume of a lung using a closure device comprising a planar body from which a plurality of tines extend, the tines being movable between contracted and expanded conditions, the method comprising:

advancing the closure device with the tines in the contracted condition along a bronchial passage to a predetermined location; and

expanding the tines outwardly towards the expanded condition to engage tissue surrounding the predetermined location, whereby the planar body substantially seals the bronchial passage from air flow through the predetermined location.

10. (Original) The method of claim 9, wherein the planar body comprises an annular body defining an opening across which a flexible membrane extends, and wherein the flexible

membrane accommodates compression and expansion of the annular body as the tines are compressed and expanded.

11. (Original) The method of claim 9, wherein the tines are constrained in the contracted condition by a delivery apparatus carrying the closure device, and wherein the expanding step comprises deploying the closure device from the delivery apparatus, whereupon the tines automatically expand towards the expanded condition.